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**CONFIDENTIAL ATTORNEY-CLIENT
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Date: APRIL 17, 2004

To: EXAMINER ^{SHAH}
U.S. PATENT AND TRADEMARK OFFICE
Fax #: (703) 872-9314

From: DARRIN WESLEY HARRIS
Fax #: (847) 905-7111

Client/Matter No.: PHB 34,390 (7790/356)

of Pages: 14
(including cover sheet)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Attorney Docket No.	PHB 34,390 (7790/356)
Application Number	09/630,896
Filing Date	AUGUST 2, 2000
First Named Inventor	TIMOTHY J. MOULSLEY
Group Art Unit	2664
Examiner	CHIRAG G. SHAH

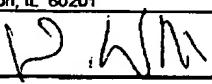
ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Response to Non-Final Office Action Dated November 17, 2003	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawings	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Post Card Receipt
<input checked="" type="checkbox"/> Two-Month Petition for Extension of Time Request (duplic)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/>
<input type="checkbox"/> Information Disclosure Statement, PTO-1449, art	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.	
	<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.	

CALCULATION OF FEE

	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Small Entity		Large Entity	
					Rate	Add'l Fee	Rate	Add'l Fee
Total		Minus		0	x \$9=	0	x \$18=	
Indep.		Minus		0	x \$43	0	x \$86	
First Presentation of Multiple Dep. Claim					+\$145	—	+\$290=	
					total add'l fee	\$ 0	total add'l fee	\$

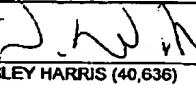
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	DARRIN WESLEY HARRIS Registration No. 40,636 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature			Date <u>April 17, 2004</u>

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile to (703) 872-9314 to the U.S. Patent and Trademark Office on this date:

April 17, 2004

Signature		Date <u>April 17, 2004</u>
DARRIN WESLEY HARRIS (40,636)		